Case 22-11413-abl Doc 4 Entered 04/22/22 15:50:10 Page 1 of 4

ill in this i	nformation to identify you	r case;				
	Domali	0-1				
ebtor 1	Parnell First Name	Colv Middle Name Last No		። ቃሌ ምና ታሌ የማ ነ		
ebtor 2				RECE		MR
	- '	Middle Name Last Na	r 	AND F	ILED	
nited States	Bankruptcy Court for the: Distr	ict of Nevada				
ase numbei f known)				2022 APR 22		Sheck if this
					8	amended fill
				U.S. BANKIRUF	PTOY COUR	· · · · · · · · · · · · · · · · · · ·
fficial	Form 103B			Addition of the	OTT, CLERY	ζ.
					_	
ppli	cation to Ha	ive the Cha	pter 7 Filing I	Fee Waiv	'ed	12
as compl	ete and accurate as possib	ele. If two married people a	are filing together, both are eq	ually responsible for	r sunnivina c	orrect
rmation.	If more space is needed, a	attach a separate sheet to	this form. On the top of any a	dditional pages, wri	te your name	and case n
nown).						
art 1:	Tell the Court About	Your Family and Your F	Family's Income			
	he size of your family? ily includes you, your	Check all that apply:				
pouse, a	ind any dependents listed	You				
	lule J: Your Expenses form 106J).	Your spouse	1	E		
	•	Your dependents	How many dependents?	T-t-l		
			now many dependents :	Total number of peo	opie	
Fill in yo	ur family's average					
monthly	income.				That person monthly net	
	our spouse's income if use is living with you, even				(take-home	
	ouse is not filing.		spouse's income. Include the n-cash governmental assistance	You	¢	0.00
	clude your spouse's		ood stamps (benefits under the sistance Program) or housing	10u	Φ	
	you are separated and use is not filing with you.	subsidies.	notation i rogitality of floading			
roui apoc	ise is not ming with you.	If you have already filled ou line 10 of that schedule.	ut Schedule I: Your Income, see	Your spouse +	- \$	
		into to or that deficulte,				0.00
				Subtotal	\$	
			rernmental assistance that you	_	- \$	
		included above,			Ψ	
		Your family's average n	nonthly net income	Total	\$	0.00
			-			
			Type of assistance			
	eceive non-cash ental assistance?	∠ No	Type of assistance	· · · · · · · · · · · · · · · · · · ·		
jovernim	ental assistance:	Yes. Describe				
		F				
	xpect your family's monthly net income to	No				
	or decrease by more than	Yes. Explain				
	na tha naut 6 mantha?					
	ng the next 6 months?					
	ng the next o months :					
0% duri	ourt why you are unable to nts within 120 days. If you		I have no income and I Covit-19. It was a life th			

Case 22-11413-abl Doc 4 Entered 04/22/22 15:50:10 Page 2 of 4

ebtor	1 Parnell	Colvin		Case number	(if known)	
	First Name Middle Name	Last Name				
Par	Tell the Court About Y	our Monthly Expenses	5			
	stimate your average monthly exp		2.50	0.00		
	clude amounts paid by any governm ported on line 2.	nent assistance that you	\$3,50	0.00		
	you have already filled out <i>Schedule</i> e 22 from that form.	J, Your Expenses, copy				
7 D.	o these expenses cover anyone	No		***************************************		
W	s reported in line 1?	Yes. Identify who				
re ex If	oes anyone other than you gularly pay any of these (penses? you have already filled out chedule I: Your Income, copy the tal from line 11.	✓ No Yes. How much do	you regularly receive a	as contributions	? \$ montl	hly
m de	o you expect your average onthly expenses to increase or ecrease by more than 10% during se next 6 months?	V No Yes. Explain				
Part	3: Tell the Court About Y	our Property				
						4. 5. 4
if yo	u have already filled out <i>Schedul</i>	e A/B: Property (Official F	-orm 106A/B) attach	copies to this	application and go	to Part 4.
E: yc	ow much cash do you have? xamples: Money you have in our wallet, in your home, and on and when you file this application	Cash:	\$ 25.00			
	ank accounts and other deposits f money?		Institution name:			Amount:
E	xamples: Checking, savings,	Checking account:	none			\$
ac	oney market, or other financial ccounts; certificates of deposit; nares in banks, credit unions,	Savings account:	none			\$
br	rokerage houses, and other milar institutions. If you have	Other financial accounts:	none			\$
more than one account with the same institution, list each. Do not include 401(k) and IRA accounts.	ore than one account with the ame institution, list each. Do not	Other financial accounts:	none			\$
	our home? (if you own it outright or	N/A				
ar	e purchasing it)	Number Street			Current value:	\$
	xamples: House, condominium, anufactured home, or mobile home	City	State	ZIP Code	Amount you owe on mortgage and liens:	\$
13. O	ther real estate?		**			
	mor rour obtato	N/A Number Street			Current value:	\$
					Amount you owe on mortgage and	\$
		City	State	ZIP Code	liens:	
14. TI	he vehicles you own?	Make: None				•
	xamples: Cars, vans, trucks,	Model:			Current value:	\$ <u></u>
	ports utility vehicles, motorcycles, actors, boats	Year:			Amount you owe	\$
u		Mileage			on liens:	¥
		Make:				
		Model:			Current value:	\$
		Year:			Amount you owe	ė
		Mileage			on liens:	\$

Case 22-11413-abl Doc 4 Entered 04/22/22 15:50:10 Page 3 of 4

Debtor 1	Parnell First Name	Middle Name	Colvin Last Name		Case numbe	er (if known)		
15. Othe	er assets?		Describe the	e other assets:		Current va	alue:	\$
	ot include house clothing.	hold items	None			Amount y on liens:	ou owe	\$
Exar or lu supp mair settle bene	ney or property of mples: Tax refund mp sum alimony, ort, child support tenance, divorce ements, Social Sefits, workers' coronal injury recovered.	ds, past due spousal i, or property ecurity mpensation,	Who owes y	ou the money or proper	\$\$	ch is owed?	payment No	elieve you will likely receive in the next 180 days? Explain:
Part 4	Answer	These Additio	onal Question	15				
ser filli bar	ve you paid any rvices for this ca ing out this appl nkruptcy filing p hedules?	ise, including ication, the ackage, or the		nom did you pay? Check An attorney A bankruptcy petition pre Someone else	parer, paralegal, or ty			How much did you pay?
yoı ser	ve you promise u expect to pay rvices for your b se?	d to pay or do someone for	No Yes. W	h om do you expect to pa An attorney A bankruptcy petition pre Someone else	parer, paralegal, or t	oly: yping service		How much do you expect to pay?
				-				
you	s anyone paid s ur behalf for ser se?		Yes. W	ho was paid on your beh neck all that apply: An attorney A bankruptcy petition pre paralegal, or typing servi	Parparer, Frie	all that apply: ent ther or sister nd tor or clergy neone else		How much did someone else pay?
	ve you filed for I thin the last 8 ye		No Yes. Di	strict	When			
			Dis	strict	When	A/ DD/ YYYY	Case numbe	er
Part !	5: Sign Bel	0147	Dis	strict	When MM	M/ DD/ YYYY	Case numbe	er
By sithat t	gning here unde the information I	er penalty of pe	is application	e that I cannot afford to p is true and correct. C Signature of Debtor 2	ay the filing fee eith	er in full or i	in installm	nents. I also declare
Da	te 04/22/2022 MM / DD / YY	<u>'YY</u>		Date MM / DD / YYYY	_			

	Parnell	Colvin		
ebtor 2	First Name Middle N	arne Last Name		
Spouse, if filing)				
ase number	ankruptcy Court for the: District of	Nevada		
(If known)				
	. 45 - Aunii	(!a. 4a	the Chest	w 7 Eiling Eog Weiss
				er 7 Filing Fee Waive
	he application is:	won to have the Cha	ipler i Filling Fee vva	ived (Official Form 103B), the cour
] Granted	. However, the court may administering the banki			
] Denied.	The debtor must pay th	e filing fee according	to the following term	s:
	You must p	ay On or befor	re this date	
	\$	Month / day	r / year	
	\$	Month / day	// year	
	\$	Month / day	// year	
	+ \$	Month / day	r / year	
	Total			
	If the debtor would like motion promptly with a Pay the Filing Fee in Inconsider it.	payment proposal. Th	he debtor may use A	pplication for Individuals to
	more property to an atte bankruptcy case. The o	orney, bankruptcy pel lebtor must also pay t any payment when it i	tition preparer, or an the entire filing fee to is due, the bankrupto	e payments or transferring any yone else in connection with the preceive a discharge. If the case may be dismissed and
] Schedul	ed for hearing.			
	A hearing to consider the	ne debtor's application	n will be held	
	on a Month / day / year	t AM / PM	Address of courthou	ıse
	If the debtor does not a	ppear at this hearing,	, the court may deny	the application.
		By the co	ourt: United States Bank	